

# CLAIMS ONLY

Application Number:

16 MA 660

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
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49						
50						
Total						
Indep						
Total						
Depend						
Total						
Claims						
		3				
		14				
		17				

\* May be used for additional claims or amendments

51	Indep	Depend	Indep	Depend	Indep	Depend
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